

Eur J Vasc Endovasc Surg 35, 628 (2008)

doi:10.1016/j.ejvs.2007.12.018, available online at <http://www.sciencedirect.com> on  **ScienceDirect**

EJVES Extra Abstracts[☆]

Endovascular Repair of a Large Deep Femoral Artery Branch Pseudoaneurysm Following a Femur Fracture: A Case Report

V. Dorrucchi, L. Spinamano, G. Petralia, F. Griselli, N. Cibi and R. Adornetto

Department of Vascular Surgery, Umberto I Hospital, Venice, Italy

This report describes the successful use of a covered stent to treat a large pseudoaneurysm of deep femoral artery branch caused by the injury of the vessel secondary to inter-trochanteric femur fracture.

doi:10.1016/j.ejvs.2007.12.018

DOI of original article:10.1016/j.ejvsextra.2007.12.001

Available online 17 March 2008

Heparin-induced Thrombocytopenia with Associated Thrombosis Causing Multiple Thromboses with Aortic Occlusion: Report of a Case

A. Yoshitake, M. Nagumo, M. Okamoto and K. Osumi

Department of Cardiovascular Surgery, National Hospital Organization Tokyo Medical Center, Tokyo, Japan

A 44-year-old woman with deep vein thrombosis caused by intra-pelvic peritonitis associated with adenomyosis uteri was administered unfractionated heparin. The platelet count gradually decreased, and computed tomography scan revealed abdominal aortic occlusion from the origin of the left renal artery to the intra-pelvic arteries, left renal infarction, pulmonary embolism, and deep

vein thrombosis. Heparin was replaced by argatroban and a successful aortobifemoral bypass was performed.

doi:10.1016/j.ejvs.2007.12.021

DOI of original article:10.1016/j.ejvsextra.2007.12.002

Available online 4 March 2008

Anomalous Course of the Left Subclavian Artery Leading to Aneurysm Formation and Thoracic Outlet Syndrome – A Case Report

B.K. Sarkar and U.N. Sarkar

Departments of Cardio Thoracic & Vascular Surgery, Institute of Cardiovascular Sciences, Institute of Post Graduate Medical Education & Research, 242, A.J.C. Bose Road, Kolkata-700020, West Bengal, India

Subclavian artery aneurysm is rare. Anomalous course of the subclavian artery behind the middle scalene muscle in the neck resulting in aneurysm formation is unknown. We describe a case of left subclavian artery aneurysm where the artery passed behind the middle scalene muscle producing angulation with distal aneurysm formation. It produced a visible swelling in the neck; effort related symptoms of fatigue or pain in the left arm muscles. The preoperative work-up and surgical procedure are described.

doi:10.1016/j.ejvs.2008.01.025

DOI of original article:10.1016/j.ejvsextra.2008.01.001

Available online 17 March 2008

[☆] Full articles available online at www.ejvsextra.com